



VA/DoD Joint Market Opportunities Update

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JMO Team Background

- The Joint Facility Utilization Resource Sharing Working Group (JFURS WG) is charged by the JEC to review VA-DoD Resource Sharing Activities as mandated by PL 97-174 (VA-DoD Health Resource Sharing and Emergency Operations Act).
- JFURS WG Goal
 - Review and Analyze Selected VA-DoD Joint Venture (JV) and Joint Market Area (JMA) sites where Demand and Economies of Scale can be optimized
- The JMO Team is a sub-element of the HEC JFURS WG
 - Objectives: Assist sites in identifying opportunities to improve Cost, Quality and Access through collaborative activities



JMO Team Background (Continued)

JMO Team Composition:

- JFURS WG Co-chairs
 - DoD VA Program Coordination Office Director
 - Ken Cox, Health Affairs
 - VA/DoD Coordination Office Director
 - Elizabeth Ruschmeier, Veterans Health Administration
- Coordination Office and Support Staff
- VA/DoD Military Service Representatives
- Outside SME & Functional Experts
 - IT and Facility/Construction community



JMO Team Background (Continued)

- JMO Team Responsibilities:
 - Review, Assess, Analyze select JV and JMA sites and provide program and policy guidance as needed
- JV Policy guidance can be found in DoDI 6010.23 and VA Directive & Handbook 0311
- Differences between JV and JMA sites
 - JV
 - Negotiated Partnership w/ shared common risk
 - Joint Functions moving towards connected, integrated or consolidated operation
 - JMA sites have resource sharing opportunities that may have shared common risk
 - Some medical facility functions/services are coordinated
 - JMA can move towards JV status



JMO Team Support Chronology

JMO Team's role has evolved from a pure survey and report function, to a facilitation and developmental support role at new and current sites:

- FY 07 (Phase I) – Surveyed and reported on all JV site activities to identify common barriers and successes
- FY 08 (Phase Ib) – JEC emphasized enhanced collaboration and opportunities at 4 specific sites which led to CONOPS development:
 - Biloxi, MS
 - Las Vegas, NV
 - Honolulu, HI
 - Denver, CO
- “One-time” designation of JIF money set aside to support JV efforts



Coordination Matrix

	Separated (1)	Coordinated (2)	Connected (3)	Integrated (4)	Consolidated (5)
Clinical Services	Insignificant referrals	Regular communications	High numbers of referrals	Significant number of referrals as one	Protocol-driven placement of all patients
Facilities	Distant	Some sharing where duplication exists	Projects & facilities come from master planning	Many departments share space	One facility or set of facilities
Staffing	Distinct	Support in peaks and valleys	Joint staff planning	Multiple examples of single/joint staffing	Single staffing
Business Processes	Different	Reduce barriers	Work flows understood & acted on	Transparent	Single system
Management/ Governance	No Relation	Joint planning sessions	Some overlap of key functions	Significant overlap of key functions	One governance & management structure
IM/IT	Separate systems	Evidence of "E" exchange of info	Moving toward systems interface	Complete interoperability	One system
Logistics	Little if any exchange	Borrowing, bartering and contractual exchange	Mutual examination of best pricing and service	Selective joint contracting of major areas of procurement	One supply chain



JMO Team Support Chronology (Cont)

- FY 09 (Phase II)- JMO Team explored enhanced collaboration at prescribed special interest sites and new JMO selected sites
- Selection of new JMO sites under Phase II were based upon analysis of a select group of criteria:
 - Enrolled Beneficiary Densities
 - Purchased Care Costs
 - Planned/Current Construction
(Construction criterion considered but not used in overall evaluation and selection of sites)
- Selected JMA sites reviewed by the JMO Team under Phase II included:
 - Charleston, SC
 - Columbus, GA
 - San Antonio, TX
 - Corpus Christi, TX
 - FL Panhandle (Panama City, Ft Walton Beach, Pensacola)
 - Tacoma, WA
 - Tampa, FL



JMO Team Support Chronology (Cont)

- FY 10 selected JMA sites:
 - Phoenix, AZ
 - San Diego, CA
 - Fayetteville, NC
 - Oklahoma City, OK
 - Omaha, NE
- Site visits were conducted in all markets to facilitate leadership communication and exploration of potential sharing opportunities. Sites are currently reporting on their progress through formal Interim Progress Reviews with the JMO Team



FY 10 Selection Criteria



1. Purchased Care Expenditures
2. Proximity Location
3. Area Enrollment Population
4. Current Working Relationship
5. Current/Future Resource Sharing Initiatives
6. Planned/Current Construction/Renovation



JMO Team Support Chronology (Cont)

- JMO Team perform combinations of site visits and telephonic IPRs with all JV and JMA sites
- JMO Team has identified the need to develop metrics and performance measures to document and evaluate the success of sharing initiatives and joint operations within JV and JMAs (addressed in several GAO reports (06-315 and 08-399)
- In FY 10 the JMO Team developed a sample Joint Committee Charter which incorporated the NDAA functional domains and suggested the use of a modified SMART Objective Template to summarize and communicate their initiatives with the JMO Team



SMART Objective Template

GOAL Title:	Working Group
SUB-GOAL:	
SMART OBJECTIVE:	Performance-based objectives should be written as statements that are: SMART Specific: understand what needs to be accomplished Measurable: link to metrics where possible Achievable: attainable, can be completed as specified Realistic: relevant and can be accomplished within time and resource limits Time-bound: clear point in time for completion
Initiatives	A specific strategy or activity that supports accomplishment of the SMART objective
Activities & Milestones	Action plan for what needs to be accomplished by when
Recommended Metric(s)	Quantitative measures that can be monitored to demonstrate progress towards meeting SMART objective
When/Where during the project should the Metric be Tracked	When/where/how metrics should be documented and reported



JMO Way Ahead

- The FY 11 market analysis is currently underway
- The same criteria used in FY 10 will be used in FY 11; however a greater emphasis will be placed on areas where there is known potential for new construction to increase opportunities for shared space and reduce costs to the federal government
- Existing JV and JMA sites will continue to be monitored and tracked for sharing success



Closing Remarks

- Continued identification of new markets with potential for improved sharing opportunities
- JMO Team site selection and review process continues to be an evolutionary evidence-based approach to success
- The JMO Team will continue to move forward with supporting the initiatives of joint senior leadership
 - Increased access for patients
 - Improved efficiency
 - Reduced duplication of services
 - Reduced infrastructure, where possible
 - Mitigating the effect of deployment on access to healthcare
- You are critical to our success